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**Change Catalog**

First Name: Click or tap here to enter text. Last Name: Click or tap here to enter text.

Banner ID: Click or tap here to enter text. Program: Click or tap here to enter text.

Street or P.O. Box: Click or tap here to enter text. City: Click or tap here to enter text.

State: Click or tap here to enter text. Zip: Click or tap here to enter text.

Home Telephone: Click or tap here to enter text. Cell Phone: Click or tap here to enter text.

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| --- | --- | --- | --- | --- |
| I request the Graduate School staff change my academic catalog year. I am aware I must follow one catalog only to meet academic requirements. I also understand that I cannot return to a previous catalog. | | | | |
| Old Catalog Click or tap here to enter text. | New Catalog Click or tap here to enter text. | Major Click or tap here to enter text. | Concentration Click or tap here to enter text. |

**Policies:**

1. Meet the requirements of one catalog which were current at the time the student entered this institution or a subsequent catalog. Students will not be allowed to meet some of the requirements of one catalog and some of the requirements of another catalog.

or

1. Meet the requirements of the catalog in effect at time of readmission or those of a subsequent catalog if attendance is interrupted for more than one year (two semesters).

***Use student BraveMail for digital signature*.** **Date**: Click or tap here to enter text.

Email completed form to [gary.locklear@uncp.edu](file:///\\facstaff.filer.uncp.edu\shared\Graduate%20Office\Forms\Alph%20Filable%20Forms\gary.locklear@uncp.edu).

**Office Use Only:**

Processed by: Date: